## PART B - FEE(S) TRANSMITTAL spolete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 SEP 27 2007 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885 INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All fertilist correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated shalls defrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 \_ 06/28/2007 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. Benjamin Aaron Adler, Ph.D., J.D. Adler & Associates 8011 Candle Lane Houston, TX 77071 YESMIN 09/28/2007 CCHAU2 00000012 10600187 (Signature) 700.00 OP 01 FC:2501 30.00 DP 02 FC:8001 FILING DATE APPLICATION NO. FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 8237 06/20/2003 Timothy J. O'Brien D6064CIP/D2 TITLE OF INVENTION: TADG-15: AN EXTRACELLULAR SERINE PROTEASE OVEREXPRESSED IN CARCINOMAS TOTAL FEE(S) DUE DATE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE APPLN. TYPE SMALL ENTITY ISSUE FEE DUE \$1000 09/28/2007 nonprovisional YES \$700 \$300 \$0 **EXAMINER** ART UNIT CLASS-SUBCLASS 435-006000 HARRIS, ALANA M 1643 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list IBENJAMIN A. ADLER (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE OF ARKANSAS FOR (B) RESIDENCE: (CITY and STATE OR COUNTRY) LITTLE ROCK, ARKANSAS MEDICAL SCIENCES

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